

North East and North Cumbria Integrated Care Board Executive Committee (Public)

Minutes of the meeting held on Tuesday 12 December 2023, 10:30hrs in the Joseph Swan Suite, Pemberton House, Colima Avenue, Sunderland

Present: Levi Buckley, Executive Area Director (North & North Cumbria)

David Chandler, Executive Director of Finance

Graham Evans, Executive Chief Digital, and Information Officer David Gallagher, Executive Area Director (Tees Valley & Central) Jacqueline Myers, Executive Chief of Strategy and Operations

Dr Neil O'Brien, Executive Medical Director (Vice Chair)

David Purdue, Executive Chief Nurse

Claire Riley, Executive Director of Corporate Governance,

Communications, and Involvement

In attendance: Rebecca Herron, Governance Manager (Committee Secretary)

Deb Cornell, Director of Corporate Governance and Board Secretary Gill Long, Associate Director of Workforce Development, Newcastle Hospitals Foundation Trust (shadowing the Executive Chief Nurse and

People Officer)

EC/2023-24/258 Agenda Item 1 - Welcome and introductions

The Chair welcomed all those present to the meeting.

EC/2023-24/259 Agenda Item 2 - Apologies for absence

Apologies for absence were received from Sam Allen, Chief Executive, Annie Laverty, Executive Director of Improvement and Experience

EC/2023-24/260 Agenda Item 3 - Declarations of interest

There were no declarations of interest made at this point in the meeting.

EC/2023-24/261 Agenda Item 4 - Minutes of the previous meeting held on 14

November 2023

RESOLVED:

The Executive Committee AGREED that the minutes of the meeting

held on 14 November 2023, were a true and accurate record.

EC/2023-24/262

Agenda Item 5 - Matters arising from the minutes and action log

The Chair requested all Executive Committee members review and update their allocated actions.

ACTION:

All executive directors to review and update their allocated actions on the action log within one week.

EC/2023-24/263

Agenda Item 6 - Notification of urgent items of any other business

No items of any urgent business had been received.

EC/2023-24/264

Agenda Item 7.1 - Executive Area Directors Update Report December 2023 (North and North Cumbria)

The Executive Area Director (North and North Cumbria) provided a summary of items outlined in the report.

The Committee was asked to particularly note from the report:

- Newcastle
 - Jesmond Health Partnership and Gosforth Memorial have commenced their patient engagement regarding a potential merger on 22nd November, creating a single practice with a list size of circa 27,000 patients.
- North Tyneside
 - Discharge oversight meetings are being established at place.
 - Urgent and Emergency Care (UEC) provision has passed through a second council motion and has been well received.
 The Committee were assured a political protocol agreement is in place with all Foundation Trusts within the ICB to ensure collaborations are occurring around political conversations.

RESOLVED:

The Committee RECEIVED the report for assurance and NOTED the decisions and assurance logs included within the report.

EC/2023-24/265

Agenda Item 7.1 - Executive Area Directors Update Report December 2023 (Tees Valley & Central)

The Executive Area Director (Tees Valley & Central) provided a summary of the items outlined in the report.

The Committee was asked to particularly note from the report:

- County Durham
 - A session has taken place with University Hospital of North Durham (UHND) which will feed into the escalation process.
- South Tyneside Borough Council are expecting a SEND inspection imminently

Sunderland

- Practices continue to report increasing pressure resulting from international students and their dependents. Net-list growth between April and October is already at 1611 however, this does not include the international students entering the city in October 2023
- The GP Out of Hours service base has now been moved into the Urgent Treatment Centre located on the Sunderland Royal Hospital site as of 6 November 2023

Tees Valley

- Ambulance Handover Delays remain an area of concern for the South Integrated Care Partnership and the Tees Valley Local Accident & Emergency Delivery Board, with James Cook University Hospital reporting sustained high levels of delays and remain an outlier across our NENC region. An RPIW is in development between South Tees Hospital Foundation Trust and North East Ambulance Service (NEAS) with the aim of working through and improving processes, ICB Delivery Team representatives are supporting with this

The Executive Chief Nurse and People Officer noted Humber and North Yorkshire ICB have received discharge funding and it would be useful to clarify the arrangements for the allocated discharge funding.

ACTION:

The Executive Area Director (Tees Valley & Central) and Director of Place (Redcar/Cleveland & Middlesbrough) to link with Humber and North Yorkshire ICB to clarify the arrangements for the allocated discharge funding.

RESOLVED:

The Committee RECEIVED the report for assurance and NOTED the decisions and assurance logs included within the report.

EC/2023-24/266

Agenda Item 8.1 – Learning Disability & Autism Service Development Fund Spending Plans for 2023-24

The Executive Area Director (North & North Cumbria) presented the report which provided the Committee with the proposed spending plan of the Service Development Funding (SDF) which has been allocated to NENC ICB for 2023/24 in support of Learning Disabilities and Autism (LDA).

NENC ICB has been allocated £6,776 million in SDF for LDA transformation in 2023/24, with a further £239,000 specifically for autism in children and young people (CYP).

The Committee were informed the key working into school's programme has undergone a 6 month evaluation. Following the evaluation there will be

a recommendation submitted to Mental Health, Learning Disability and Autism (MHLDA) Sub-Committee to realign the allocation.

£731,000 which had been earmarked for potential waiting list initiatives is currently on hold and a plan is in development.

£2.8 million which was allocated to reducing seclusion and segregation has been enabling the transforming care programme. NHSE are scrutinising the outcomes of this investment.

The Committee were assured the MHLDA Sub-Committee supported the proposals outlined within the report.

It was noted clarity is needed on notable outcomes for the investment.

It was noted the 2024/25 plans will help facilitate conversations.

RESOLVED:

- 1) The Committee APPROVED the spending plan for use of the service development funding allocated to NENC ICB for 2023/24.
- 2) The Committee APPROVED the delegation of authority to the Executive Director with responsibility for LDA, together with the Director of Transformation for LDA&MH and a Director of Finance to commit the remaining £248,000 against priorities later in the year.

EC/2023-24/267 Agenda Item 8.2 – Workforce Development Funding

The Executive Chief Nurse and People Officer presented the report which provided the Committee with the proposed arrangements for workforce development funding.

Historically workforce funding was allocated to several different providers across the ICB.

The Committee were informed a plan is in place to bring the funding into the ICB. The funding is granted with a specific remit and will be in line with the new ICB budget controls.

The Committee agreed this was a helpful paper and asked the Executive Chief Nurse and People Officer to consider how we can align some of the workforce funding to the economic development of the Healthier and Fairer work.

The Executive Director of Corporate Governance, Communications, and Involvement suggested the alignment of NHS Find Your Place to the Workforce Development Funding.

The Committee supported the recommendations as outlined within the report.

RESOLVED:

- 1) The Committee APPROVED the current budget sits outside of the ICB non-discretionary spend arrangements with authorisation coming from Director of Workforce and Executive Chief Nurse and people Officer.
- 2) The Committee APPROVED any future projects / ring fenced funds received by the ICB for workforce transformation to be added and included in this budget with the same sign off arrangements
- 3) The Committee APPROVED the quarterly monitoring of future projects.

EC/2023-24/268

Agenda Item 8.3 – Northern Cancer Alliance Prioritisation of Finance Proposal

The Executive Area Director (North & North Cumbria) declared a conflict in relation to this item, due to a family member being Chief Executive of Healthworks. Healthworks provide some services to Newcastle Hospitals Foundation Trust for community based interventions.

The Chair noted the declaration and clarified that the Executive Area Director (North & North Cumbria) would abstain from any decision making relating to this item.

The Chair presented the report which provided the Committee with the proposed reprioritisation of the Northern Cancer Alliance (NCA) Funding.

In line with the H2 prioritisation exercise the Northern Cancer Alliance senior team have been working with ICB colleagues to assess all finances that have not yet been spent. An underspend of £1 million has been identified, the expected spend on the remainder of the budget for this year is included within the report.

The Committee is asked to approve the recommendations outlined within the report.

The Executive Director of Corporate Governance, Communications, and Involvement requested a sign off protocol be developed for any campaign and leaflet work to ensure there is a coordinated approach with the ICB Communication Team. The Committee were assured the programme would welcome the communications approach.

The Executive Director of Finance suggested an annual plan be developed with governance arrangements in place.

It was noted the £500,000 budget for Lung Cancer is not well defined within the proposal. The Executive Medical Director confirmed further detail will be available when plans have been developed.

ACTION:

The Executive Medical Director to link with the Director of Corporate Governance regarding the governance arrangements of the NCA.

RESOLVED:

- 1) The Committee APPROVED the committed NCA spend of £2,614,402 (inc. VAT) as outlined in tables 1,2 & 3 within the report
- 2) The Committee APPROVED the recommended programme of work in table 4 totalling £555,000
- 3) The Committee APPROVED that NCA keeps a budget for operational performance
- 4) The Committee APPROVED the total funds to be reprioritised as outlined within the report

EC/2023-24/269 Agenda Item 9.1 - NENC ICB and ICS Finance Report Month 7

The Executive Director or Finance introduced the report which provided the Committee with an update on the financial performance of the North East and North Cumbria Integrated Care Board (NENC ICB) and NENC Integrated Care System (ICS) in the financial year 2023/24 for the period to 31 October 2023.

Month 8 position is currently being formulated. There is a major risk around future strike action and the financial impact of this on the ICS bottom line.

The Executive Director of Finance provided the Committee with an update of the national picture and NHSE predicted overspend.

It was noted Month 9 will be a key month for the ICB and ICS financial plans.

The Committee recognised the financial risks and the ongoing work to mitigate the risks.

RESOLVED:

- 1) The Committee NOTED the latest year to date and forecast financial position for 2023/24.
- 2) The Committee NOTED there are a number of financial risks across the system still to be managed.

- 3) The Committee NOTED the approach in respect of financial controls and proposed oversight arrangements for both financial controls and efficiency going forward.
- 4) The Committee NOTED the approach in respect of financial controls and proposed oversight arrangements for both financial controls and efficiency going forward.

EC/2023-24/270 Agenda Item 10.1 - Integrated Delivery Report

The Executive Chief of Strategy and Operations introduced the report which provided the Committee with an overview of quality and performance, highlighting any significant changes, areas of risk and mitigating actions.

The Committee was informed of the key messages as follows:

- Urgent and Emergency Care
 - Category 2 ambulance response times were on plan in October 2023 this has slightly decreased by 20 seconds in November 2023. It was noted December will be a challenge.
- Electives
 - Due to changes made to the plan following the H2 planning exercise the ICB now has a significant trajectory for long waiting times. 1145 people will be waiting over 65 weeks for treatment at the end of March 2024, with 167 people waiting over 78 weeks. The Committee were assured this has been discussed at the Newcastle Hopsitals Foundation Trust oversight meeting and a weekly trajectory by speciality has been requested
 - It was noted that strike action is a major risk and will have a significant impact. There are four hundred elective slots at risk during the strike action planned for next week
 - Cancer 62 day waits are currently at 250 above plan

RESOLVED:

The Committee RECEIVED the report for information and assurance.

EC/2023-24/271 Agenda Item 10.2 – Winter Planning

The Executive Chief of Strategy and Operations introduced the report which provided the Committee with the Prioritised Areas of Urgent and Emergency Care (UEC) Focus as a whole system.

This report was previously submitted to the Committee in September 2023. This is a comprehensive paper which refences the investments which are recommended including £1.5 million for Acute Respiratory Infection (ARIs) Hubs and £1.05 million for Front Door Models.

It was noted there are conversations ongoing regarding the North East Ambulance Service (NEAS) investment monies and allocating a proportion

to North Cumbria. There is a contract meeting scheduled for 13 December 2023 where the issue will be discussed further. The Committee agreed the £1 million underspend will come back into the ICB and will then be allocated to providers.

It was noted for the model to be successful it will be key to navigate people from emergency departments back to primary care. It was suggested this could form part of the evaluation process.

It was noted that the ICB will need to manage national expectations around the ongoing virtual wards work.

RESOLVED:

- 1) The Committee NOTED the comprehensive update on Winter across a wide range of services and programmes
- 2) The Committee NOTED that the long term viability of Virtual Wards given the current state of utilisation is a significant concern and the UEC Strategic Board has tasked a clinical and managerial group to develop options for consideration for 2023/24 including integrated models across community escalation pathways alongside services such as UCRs, ARIs, and integrated neighbourhood teams.

EC/2023-24/272

Agenda Item 10.2.1 - Acute Respiratory Infection (ARI) Hub Business Case

The Chair introduced the report which provided the Committee with the proposed funding release for the ARI Hubs and the Front Door Models at all Emergency Departments.

The Committee were assured the ARI Hubs business case was within the ICB H2 plan, due to the value being over £1 million formal ratification is required from the Committee.

All ARI hubs will be in place by 18 December 2023.

The Executive Area Director (Tees Valley & Central) enquired as to the assurance the Local Accident & Emergency Delivery Boards are delivering the agreed winter plans. The Executive Medical Director confirmed Places should be able to identify if the plans are being delivered.

It was noted there is a need to understand what community and place based budgets for the delivery of winter are in place. It was agreed this would be a piece of work for next year.

The Committee supported the ARI Hub business case proposal.

ACTION:

The Executive Medical Director to link with the Executive Area Directors to determine the community and place budgets for the delivery of winter for 2024/25.

RESOLVED:

The Committee APPROVED the recommended option 2 for ARIs and Front Door Navigation as outlined within the business case

EC/2023-24/273 Agenda Item 11 - Commissioning

No update for this item.

EC/2023-24/274 Agenda Item 12.1 – Children and Young People Palliative and End of Life Care Strategy

The Clinical Lead for Children and Young People (CYP) Palliative and End of Life Care (PEOL) dialled into the meeting at 10:50am to remotely present the report.

The Clinical Lead for CYP PEOL introduced the report which provided the Committee with the ICS All Age Palliative and End of life care strategy and work plan.

The Regional team has identified variation and inequity within the services provided across the ICB. The strategy outlines the work needed to bring the NENC ICS in line with National Institute for Health and Care Excellence guidance and NHSE service specification for Palliative and End of Live Care for Babies, Children, and Young People.

The Clinical Lead for CYP PEOL highlighted the key issues:

- Lack of access to 24/7 care or specialist advice for children's palliative care
- Inequity of services according to location, diagnosis, or age
- The current paediatric palliative care multidisciplinary team does not include minimum membership/expertise outlined by NICE guidance (e.g., specialist paediatric palliative care consultant, specialist pharmacist, family support experts)
- Existing specialist palliative care team is insufficient to sustainably meet the needs of the region
- Insufficient coordination or data across the region

The Executive Area Director (North & North Cumbria) outlined a number of points for the next stages which included:

- The strategy to be fed through the ICB planning process
- Timescales to be clarified i.e., short, medium, and long term
- To align with ICP strategy and other strategic documents
- This will need to be delivered within the financial envelope

The Executive Chief Digital and Information Officer enquired is the necessary system and infrastructure in place or is more investment required. The Clinical Lead for CYP PEOL confirmed there is a dashboard for adult palliative care needs and there has been a request to add children and young people to this dashboard. There is no data from primary care for children with palliative care need, there is national work ongoing which will need investment.

The Committee thanked the Clinical Lead for CYP PEOL for the work conducted on the strategy.

The Executive Director of Finance offered to support the mapping the current and future state.

The Committee supported the further development of the CYP PEOL strategy.

RESOLVED:

The Committee SUPPORTED the further development of the CYP PEOL Strategy

The Clinical Lead for Children and Young People (CYP) Palliative and End of Life Care (PEOL) left the meeting at 11:06am

EC/2023-24/275

Agenda Item 12.2 – Equality Diversity and Inclusion (EDI) Implementation Plan

At 11:20am the Director of Health Equity and Inclusion joined the meeting to present the report

The Director of Health Equity and Inclusion introduced the report which provided the Committee with an update on the progress and challenges around the delivery of the ICB Interim EDI 1 Year strategy and its associated implementation plan tracker.

The Director of Health Equity and Inclusion shared presentation slides with the members.

The key points from the presentation slides were:

- To date, almost half of actions have been delivered and completed. With a further quarter moving towards delivery, however some are slower than originally intended and anticipated, due to a limited number of resources and additional tasks being brought forward
- Several events have been planned and have taken place including:
 - Bi-sexuality Awareness Day 23rd September
 - Macmillian Coffee Morning 29th September
 - Black History Month throughout October featuring a joint event with Gateshead FT on 20th October
 - Hate Crime Awareness Week 14 October 21 October

- World Menopause Day 18 October
- Diwali Sunday 12 November
- Disability History Month 16 November 16 December, featuring a joint event with VONNE on 7th December
- Health Equity Centre of learning is launching within 2023/24 with funding from the Healthier and Fairer programme. This will be accessed via the Boost learning and improvement community, which in turn will be hosted on the MECC / Yalla platform
- In October, the ICB published on the ICB website well ahead of the mandatory deadline of March 2024 our Gender Pay Gap for the ICB in 2024/25 and allowed us to get ahead of compliance and plan ahead for excellence. The ICB has also published voluntarily our Disability Pay Gap and Ethnicity Pay Gap
- A system Equality Monitoring Form has been developed, to ensure
 we are capturing and monitoring the same consistent information to
 fulfil the public sector equality duty and monitor usage and uptake
 from all people across our region. We are currently piloting this with
 the Boost community and with involvement colleagues, before
 sharing more widely in the system

It was noted the pay gap summary table shows a distinct lack of equity between genders.

The Director of Health Equity and Inclusion suggested to support the EDI work the Committee members personally champion a characteristic to lead on and to nominate a lead director from their teams.

It was agreed a broader discussion with the committee members is required to allocate a characteristic.

A concern was raised regarding the resource of the team. It was agreed the medium to address the team capacity will be through the ICB 2.0 project and the EDI structure.

ACTION:

The Committee members to discuss and agree a characteristic to champion

RESOLVED:

The Committee RECEIVED the EDI Report for information and assurance

At 11:34am the Director of Health Equity and Inclusion left the meeting

EC/2023-24/276 Agenda Item 13.1 – Newcastle Place Sub-Committee Terms of Reference

The Executive Director of Corporate Governance, Communications, and involvement introduced the report which provided the Committee with the revised Terms of Reference from the Place Sub-Committees.

The Committee was asked to ratify Place Sub-Committee Terms of Reference for:

Newcastle Place

RESOLVED:

The Committee APPROVED the Terms of Reference for:

Newcastle Place

EC/2023-24/277 Agenda Item 13.2 – Risk Management Report

The Executive Director of Corporate Governance, Communications, and Involvement introduced the report which provided the Committee with the updated position on the risks facing the organisation for the period 19 October 2023 to 23 November 2023.

It was noted there are currently 16 overdue risks, each Executive Director will be written to and will be required to provide an update on their allocated risks.

A board development session is scheduled in February 2024 around risk, it is important that the level of overdue risks at that point is significantly reduced.

The Executive Chief Digital and Information Officer confirmed the overdue risk aligned to the Committee - NENC/0048 - Transfer of patient records from one GPIT system (EMIS) to another platform (TPP- SystemOne) is currently in the process of being spilt into two separate risks. The Committee were assured once the spit has taken place the risks will be updated.

The Director of Corporate Governance informed the Committee following the work around the ICB risk appetite a full review of the wording within the risks is taking place.

The Executive Area Director (Tees Valley & Central) confirmed risk NENC/ 0044 is no longer a risk as the staff transfer has now taken place, this should now be classified as an issue.

RESOLVED:

The Committee RECEIVED the report for assurance.

EC/2023-24/278 Agenda Item 13.3 - People Group Governance Arrangements Proposal

The Executive Chief Nurse and People Officer introduced the report which provided the Committee with the proposed changes to two current people groups along with the establishment of a new group to support and provide assurance on the delivery of the People and Culture Strategy.

The People & OD Steering Group and the NENC Integrated People Group have been established by the ICB Executive Committee as formal subgroups of the Committee. The Integrated People Group is an external system wide group. A review of the groups has taken place and amendments have been recommended.

The Committee is asked to approve the recommendations outlined with the report.

The Executive Director of Corporate Governance, Communications, and Involvement enquired as to the proposed System
People Partnership Forum and the governance arrangements. It was suggested a clear dotted line to the System Leadership Group will be required. The Executive Chief Nurse and People Officer confirmed this would be in place.

ACTION:

The Governance Team to submit the updated Terms of Reference for the agreed groups/sub-committee to the Committee in January 2024 for ratification

RESOLVED:

- 1) The Committee APPROVED the establishment of a new System People Strategy Group
- 2) The Committee APPROVED changing the North East and North Cumbia Integrated People Group to the System People Partnership Forum
- 3) The Committee APPROVED the People & OD Steering Group becoming a sub-committee of the Executive Committee with an agreed scope of decision-making powers
- 4) The Committee APPROVED the groups to operate within this new governance structure from January 2024 in shadow form, developing terms of refence for presentation to the Executive Committee at its January meeting

EC/2023-24/279 Agenda Item 14.1.1 – ICB 2 Steering Group Highlight Report

The Executive Chief of Strategy and Operations reminded the Committee members of their actions regarding the 2.0 programme:

- to sign off and finalise the impact of the consultation on structures
- to finalise a paragraph explaining any changes to the structures to be included within the post-consultation document

It was noted the Committee will be required to approve the end of consultation document prior to the 9 January 2024. It was agreed to schedule an extra Committee meeting to approve the end of consultation document.

Noted for information and assurance.

ACTION:

The Director of Corporate Governance to establish an extra Committee meeting on the morning of the 9 January 2024 to approve the end of consultation document

RESOLVED:

The Committee RECEIVED the report for assurance.

EC/2023-24/280 Age

Agenda Item 14.1.2 - Contract Group Report

Noted for information and assurance only.

RESOLVED:

The Committee RECEIVED the report for assurance.

Agenda Item 14.1.3 - People and OD Steering Group Report

Noted for information and assurance only.

RESOLVED:

The Committee RECEIVED the report for assurance.

EC/2023-24/281

Agenda Item 14.2.1 – Place Sub-committee Minutes

County Durham - noted for information and assurance only. South Tyneside - noted for information and assurance only. Sunderland - noted for information and assurance only. Hartlepool - noted for information and assurance only. South Tees - noted for information and assurance only. Stockton - noted for information and assurance only. Gateshead - noted for information and assurance only. North Tyneside - noted for information and assurance only. Northumberland - noted for information and assurance only. North Cumbria - noted for information and assurance only.

RESOLVED:

The Committee RECEIVED the Sub-Committee minutes as listed above for assurance.

EC/2023-24/282

Agenda Item 14.2.2 – Primary Care Strategy and Delivery Sub-Committee (PCSDSC) Minutes

The Executive Area Director (Tees Valley & Central) informed the Committee the Primary Care Dental Access Recovery Plan paper has not been submitted to the Committee. The PCSDSC met on 20 November 2023 and there is a request for the Committee to support the recommendations within the report.

The Executive Area Director (Tees Valley & Central) informed the Committee of the key points of the paper which included:

- The national agreement allows overperforming by 102% and the clawback arrangements
- ICB commissioning of non-recurrent activity of up to 110% of the contract which allows flexibility

The Committee agreed the paper would be distributed to the Committee member via email following the meeting and support would be recorded through the email trail.

Noted for information and assurance only.

ACTION:

The Committee Secretary to circulate the Primary Care Dental Access Recovery Plan to Committee member for approval via email

RESOLVED:

The Committee RECEIVED the Primary Care Strategy and Delivery Sub-Committee Minutes for assurance.

EC/2023-24/283

Agenda Item 15.1 – Emergency Preparedness, Resilience and Response (EPRR) Policy

RESOLVED:

The Executive Committee APPROVED the EPRR Policy

EC/2023-24/284

Agenda Item 15.2 - Business Continuity Policy

It was noted a table top exercise is scheduled for next week.

RESOLVED:

The Executive Committee APPROVED the Business Continuity Policy

EC/2023-24/285

Agenda Item 16.1 – Any Other Business

There were no items of any other business for consideration.

EC/2023-24/286

Agenda Item 16.2 - New Risks to add to the Risk Register

As noted in item 13.2 risk NENC/0048 - Transfer of patient records from one GPIT system (EMIS) to another platform (TPP- SystemOne) is currently being split into two risks. The Executive Chief Digital and

Information Officer is liaising with NECS governance colleagues to develop the risks further.

There were no new risks identified.

EC/2023-24/287 Agenda Item 17 - CLOSE

The meeting was closed at 12:05hrs.

Date and Time of Next Meeting

Tuesday 16 January 2024 10:30am.

Signed

Name Dr Neil O'Brien

Date 18/01/2024